

CLAIMS ONLY

SERIAL NO.
09849395

FILING DATE
5-7-01

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
|--------------|----------|------|------------------------|------|------------------------|------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 1 | 1 | | 1 | | | |
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| TOTAL IND. | 2 | | 4 | | | |
| TOTAL DEP. | 3 | | 3 | | | |
| TOTAL CLAIMS | 5 | | 7 | | | |

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| TOTAL IND. | | | | | | |
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| TOTAL CLAIMS | | | | | | |

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO. FILING DATE

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
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| TOTAL IND. | 12 | | | | | |
| TOTAL DEP. | 4 | | | | | |
| TOTAL CLAIMS | 4 | | | | | |

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